Resource Facilitation Service for traumatic brain injury 3-30-07

- 1. RFS is a community-based, self-advocacy support service for people with TBI and their families.
- 2. RFS is the only statewide, no-fee source of information, referral and support for people with TBI in Montana. It is a low cost, practical solution to the growing numbers of trauma survivors with undiagnosed and misunderstood brain injuries.
- 3. RFS was identified as a critical need for Montana five years ago, in a study conducted by DPHHS, that brain injury is often not diagnosed for months or years after the injury, even though survivors start to show signs of profound changes in attention, memory, cognition, executive function and personality within weeks of injury. While there is evidence that brains never stop recovering from injury, the brain is capable of making its greatest gains during the first eight months post injury. Maximizing this potential can often prevent loss of jobs, marriages and functional capacity.
- 4. Serves two kinds of TBI survivor:
  - a. People who have just been discharged from an emergency room or hospital bed with a possible brain injury.
  - b. People who call the Brain Injury Association asking for information or assistance in addressing the challenges of living with TBI.
- 5. RFS is based on the model developed in Minnesota to address the needs of people recently discharged from ER's and hospitals. In Minnesota, outcome data for RFS showed that participants had:
  - a. A rate of return to work at twice the national average.
  - b. An increased likelihood that children with brain injuries received appropriate educational supports;
  - c. Increased family understanding and support, and decreased family crisis.
  - d. Reduced long-term dependence on public assistance.
  - e. A reduced risk of institutionalization.
- 6. RFS enrolls recently discharged people who signed a waiver while they were in the hospital. RFS contacts participants by phone two weeks after discharge, then again at 6 month intervals for the next two years. RFS provides written followup to all calls (a must for people with TBI), and provides specialized written information about brain injury issues and options. It helps people and families understand what

is happening to them and how best to respond.

- 7. RF is structured to be effective for people who have attention and cognitive deficits as a result of their injuries. Every contact is followed by a written summary of the information provided. Followup calls are scheduled in a computer database to help participants with memory deficits because of brain injury succeed at their plans.
- 8. The Brain Injury Association of Montana developed RFS in its Missoula office with help from DPHHS, which managed the federal planning grant. RFS is one year old now and serves almost 300 people; the caseload grows every week.

RFS is funded with a very small federal implementation grant through March, 2008, at 30 hours of staff time per week. The Montana Advocacy Program currently pays all overhead costs under a temporary arrangement. Current funding levels are insufficient to meet the demand that would generated by full hospital participation, nor is there enough funding to pay for a development coordinator to run the office, maintain hospital relationships and ensure orderly program growth. Without adequate state funding for the next biennium, the Brain Injury Association will have to start phasing out the service this year.

The Resource Facilitation Service is a resource for Montana's elected leaders and their constituents. Please call 800-241-6442, or 541-6442 in Missoula.